

May 1995

# Clinical Center News

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- PEF auction
- Education and training
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### Oklahoma tragedy brings tighter security to CC and NIH

News of April 19's bombing of the federal building in Oklahoma City immediately raised security concerns across the country, including here.

Federal Protective Services placed government buildings under a maximum security alert soon after the bombing, said Tom Brightwell, police branch chief, NIH Division of Security Operations.

Officers and bomb-sniffing dogs have stepped up routine patrols in the CC parking garage and around the grounds. Access to underground parking was limited to the P3 entrance beginning April 21. To ensure safety, NIH police and contract security personnel are scrutinizing ID cards and car registrations of drivers attempting to park underground.

"We want employees or visitors who notice a suspicious person or package to call us," Brightwell said. "NIH officers will respond. And once they determine the threat level, we don't mind if it turns out to be nothing. That just tells us that people are being watchful and careful."

To report a problem to the NIH police, call 496-5685. In emergencies, call 115.



### Children at work

A tour of the Pharmacy Department with Dr. Karim Calis was among stops on a CC tour organized by a group of nurses on 11 East for the NIH observance of Take Your Children to Work Day, April 27. The tours included up-close, hands-on glimpses into the variety of careers involving science and medicine.

## Options team to look for better ways of doing business at CC

An options team created at the direction of HHS Secretary Donna Shalala is reviewing CC operations to develop alternate approaches for improving the way the Clinical Center conducts business. Their first meeting was April 26.

Dr. Helen Smits, deputy administrator of the Health Care Financing Administration, chairs the options team. Dr. Smits has been working with the Clinical Center

since March on behalf of Secretary Shalala to study options relating to the CC's participation in the second phase of the Vice President's Reinventing Government Initiative known as REGO II.

"The options team offers a productive means of reviewing the Clinical Center," says Dr. John Gallin, CC director. "The team is made up of NIH clinical investigators

Continued on the back page



From the director

## Options team looks at CC operations

by Dr. John Gallin  
CC director

Review of Clinical Center operations continues in connection with the nation's reinventing government initiative. HHS Secretary Donna Shalala asked Dr. Helen Smits, deputy administrator of the Health Care Financing Administration, to oversee these efforts. Her initial meetings have been with me and my staff, CC department heads, union representatives, and the Medical Board.

More in-depth examinations now under way focus on how the Clinical Center conducts business day-to-day. The determination may be that there is room for improvement, that there are better ways to carry out certain portions of our mission. It may be in our best interest to develop alternative ways to manage and carry out certain

aspects of our responsibilities.

Contracting out certain services is one option. Removing bureaucratic stumbling blocks to efficiency is another. The answer may be a combination of both approaches. But the basic mandate is to craft a more responsive, efficient Clinical Center to support NIH clinical research into the next decade.

Helping carry out this review and formulate proposals for future CC directions is an options team, also formed at Secretary Shalala's direction. (See related story on page one.) Clinical Center employees will be asked to cooperate with this committee, and we will keep you informed throughout.

We need the involvement of each CC employee in this effort. Your honest opinions and insight are valued and crucial to our success.

## answers

(Editor's note: Dr. John Gallin, CC director, asked employees to send him job-related concerns and questions. *CCNews* will print Dr. Gallin's responses in a periodic series that continues this month.)

### (Comment) What type of mandatory supervisory training do our supervisors receive, especially new supervisors?

(Dr. Gallin) Leadership development and continuing education are critical to our organization. The Office of Personnel Management requires that new government supervisors take a minimum of 40 hours of supervisory development training. That training can be the Clinical Center's comprehensive 40-hour course, "Motivating Your Employees," or any

combination of more specific, technical courses of use to the new manager or supervisor.

All new supervisors who attend the CC's new employee orientation receive letters from the chief of the education and training section advising them of the requirement and necessity for the initial 40-hours of training. But we want managers and supervisors to continue their education, so additional sessions are also provided for those who have passed the probationary period.

## Police to step up parking checks on P3 garage level

It's getting harder to find a place to park in the Clinical Center's underground P3 area reserved for patients, their families, and their visitors.

"Patients coming to the Clinical Center for appointments have reported that it's becoming increasingly difficult to find a place to park in the area that is specifically set aside for them," notes Walter L. Jones, CC deputy director for management and operations. "Patients need to feel confident that they will be able to find a place to park that allows them easy access to the hospital and clinics. That's one less worry facing patients and care givers."

As many as 450 inpatients and outpatients come to the Clinical Center each day. And that's about how many spaces are available.

So who's causing the log jam? On one recent morning, more than 120 cars parked on P3 had black or red NIH parking stickers.

"Employees who are CC patients are eligible to park in P3 when they are in building 10 as a patient," points out Tom Brightwell, police branch chief, NIH Division of Security Operations.

Drivers who park in P3 illegally can expect a ticket, added Brightwell. "NIH police will monitor and enforce parking regulations daily in this area."

A parking ticket will cost drivers \$30. Make that up to \$250 if you're found in a space reserved for the handicapped.

A few spaces on P3 are set aside for blue-stickered contractors who repair equipment in building 10. The 459 parking spaces on P3 include 53 spaces reserved for drivers with handicapped stickers.

Clinical Center  
**News**

Editor: Sara Byars

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Readying the "white elephant" portion of the May 23's Patient Emergency Fund Auction are (from left) Patty DiToto, Social Work Department; Jo Abbott, Medical Record Department; and Floride Canter, Red Cross volunteer. This year's white-elephant items include books, fine jewelry, and collectibles. With them is Canter's visiting grandson, William. The annual auction is set for 11 a.m.-2 p.m. in the Visitor Information Center.

## Annual PEF auction offers goodies for a good cause

Plan on attending this year's Patient Emergency Fund Auction slated for 11 a.m.-2 p.m. on Tuesday, May 23, in the Visitor Information Center.

Participants can bid on a Redskins game of choice, and one of the many weekends for two at the romantic Cross Keys Country Inn near Baltimore or the luxurious Savoy Suites Hotel in Georgetown.

Also on the auction list are great-escape weekends, theater tickets, and restaurant dinners. Tickets for the \$500 cash raffle will be available the week of the auction.

All proceeds from the auction and associated events—such as the white-elephant and bake sales and the cash raffle—go directly to the Patient Emergency Fund. Sponsors are the Friends of the Clinical Center and the R&W Association. For details, call Ruth Stragner at 496-6061.

## briefs

### Marrow donors honored May 21

Theirs were gifts of hope and of life.

The NIH Marrow Donor Center will honor the 120 local residents who have donated marrow with a celebration May 21 at 11 a.m. at the Natcher Building. Highlight of the event will be when one donor and his teenaged marrow recipient meet for the first time.

Guest speakers include Dr. Craig Howe, chief executive officer of the National Marrow Donor Program (NMDP) based in Minnesota, and Dr. Harvey Klein, chief of the CC Department of Transfusion Medicine.

The national organization, established in 1987 to match donors with patients in need of marrow transplants, is a collaborative, non-profit effort of the American Association of Blood Banks, the American Red Cross, and the Council

of Community Blood Centers.

The NIH center, one of NMDP's 105 regional centers, is based in the CC Department of Transfusion Medicine. It is NMDP's largest hospital-based program.

### May 19 celebration cites blood donors

Their commitment to patient care and research has made a critical difference at the Clinical Center. They are the more than 3,000 volunteers who have given a collective 6,000 units of blood in the last year.

They're also guests of honor for the Department of Transfusion Medicine's donor appreciation day set for Friday, May 19. The program's theme—We are Family—spotlights the families of CC patients who dedicatedly donate blood.

"Our donors are important and we want them to know how much we

appreciate their commitment," says Keith Redmond, donor resources supervisor.

The donor appreciation day events get under way with an awards ceremony at 11 a.m. in Masur Auditorium. A reception follows.

### Nurses hold annual meeting May 11

Members of the Clinical Center's Nursing Department will gather for their annual meeting on May 11, 2-3:30 p.m., in Lipsett Amphitheater.

"The meeting offers department members an opportunity to recognize individual and team excellence," says Kathy McKeon, CC associate director for nursing. The department's top awards will be announced.

A reception and professional poster display will follow from 3:30-5 p.m. in the Visitor Information Center.



Staffers from the education and training section, Office of Human Resources Management, prepare for a program. From left are Sandy Thorpe, Sandy Whalen, Stacey Bauman, and Madeleine Catravas.



## Section focuses on improving job performance for CC workers through training, education

Special is a word Karen Pascal uses frequently. The Office of Human Resources Management education and training section chief uses it

when she talks about her staff, the programs they design and teach, and when she talks about the Clinical Center or the people who work here.

During the last year, education and training section (ETS) staff organized training programs for 2,300 Clinical Center employees, authorized 60,760 class hours, and processed more than 4,000 training nomination forms.

All are designed to improve the individual and organizational performance of CC employees starting with day one. The new employee orientation sessions, offered every two weeks in the Medical Board Room, are especially important to Pascal.

"Sometimes we meet with new workers one-on-one and sometimes with a dozen. It's important to give the new employee a welcome," Pascal says. "We show them our award-winning video, 'The Clinical Center—A Special Place,' we bring in guest speakers, and we offer refreshments. Our goal is to provide new employees with a positive first

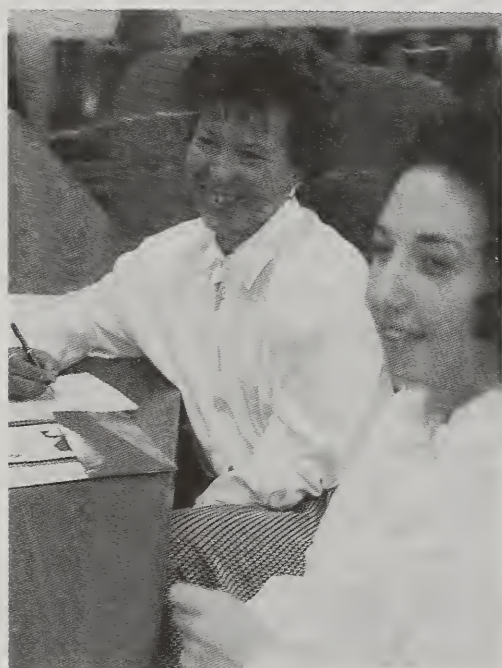
impression and assist them in integrating into their new jobs."

To better understand the training most needed by non-supervisory staff, ETS conducted a needs-assessment survey. With the information gleaned from the responses, ETS is designing new classes aimed at the specific needs of CC employees.

"Communicating More Effectively" is a class Grace Raye found useful for her work in the Nutrition Department. "I have to communicate with patients and understand how they feel. The class helped me very much. I learned different ways to communicate, to listen, and watch for body language."

"We work with employees to address their unique needs," Pascal says. "Improving the skill and capacity of our work force will enhance productivity. Knowing what skills are needed by the employees is the first step in providing the training."

But sometimes, even the best intentions backfire on the instructor.



Offering orientations for new employees is an important aspect of ETS's responsibilities. Attending a recent one were (from left) Jewel Jackson, Rehabilitation Medicine Department, and Katherine English, Pharmacy Department.



Pascal notes one stress-management class for a particularly hostile and non-interactive group at another agency.

"It was clear right away that those people did not choose to be there. Something was very wrong with the group dynamics," she explained. "So I called an early break and went to my car to think. I figured I had three choices: go on as planned despite the tension, cancel the class and go home sick, or go back in and find out what these people needed from me."

Once back in the classroom the problem became quickly apparent.

"These employees had just learned that they would soon lose their jobs and the stress-management course was, in effect, offered by their supervisors as a bandage. It was meant as a means of helping the employees cope with bad news, but it was an inadequate response to their crisis."

Pascal, who has a master's degree in counseling, was able to address the group members' particular needs, begin to turn negative thoughts into productive ones, and end the class successfully.

Aside from dealing with individuals and their special needs, ETS also coordinates mandatory training as dictated by HHS covering such areas as HIV/AIDS in the workplace, preventing sexual harassment, and ethics. ETS also authorizes all CC training nominations ensuring that they conform to OPM, HHS, PHS, and NIH legal, regulatory, and policy requirements. There have been changes in government training policies as a result of the Federal Workforce Restructuring Act of 1994, and ETS is communicating the new policies to CC department heads, supervisors, and training contacts.

A successful training and education program depends on collaboration and ETS often works with groups both within and outside the Clinical Center to provide appropriate training for CC employees. Recently ETS customized classes in communications, group dynamics, and valuing differences to better serve the specific needs of the

## *ETS offers a variety of classes*

A sampling of classes offered by ETS include:

**Stress Management Techniques.** Understand stress and how it can affect your mind and body. Participants can analyze personal stress and develop a plan of action to deal with it.

**Motivating Your Employees.** Develop supervisory and management skills.

**Personal Differences in the Work Environment—Developing Harmony.** This three-part series examines how employees are similar and different from others on the work team and assesses how these similarities and differences can facilitate or block creativity.

**Coping with the Difficult Employee.** This new and innovative class helps supervisors identify and clarify the complex issues involved in handling "difficult" or troubled employees.

**How to Make an Effective Presentation.** This class covers basic steps to effective public speaking.

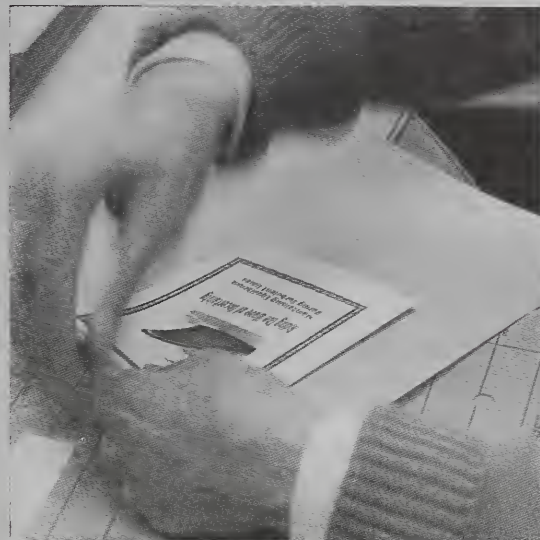
**How to Manage Your Meetings.** What's the best way to conduct productive and efficient meetings?

**Interviewing Techniques.** Develop the skills necessary to make wise hiring decisions.

**A Confrontational Session: Managing It Successfully.** How to analyze conflict and handle it at any stage with emphasis on the techniques of delivering constructive criticism.

**Eliminating Emotional Interference for Maximum Performance—The Theory of Cognitive Restructuring.** A special session designed for Diagnostic Radiology's in-service program. Participants examined how they react and respond to conflict.

Call the ETS at 496-1618 for details on these and other training opportunities.



Clinical Pathology, Diagnostic Radiology, Nursing, Communications, and other CC departments.

Mike Kolf, Pharmacy Department, enjoyed the Myers-Briggs Type Indicator class. "It's useful to anybody, anywhere. So much of what is lacking in society is understanding people. Certain people need to be approached different ways. Listening and giving feedback are skills we can all use, but it takes practice."

Collaboration and diversity management are very important to

Pascal and her staff and although "training does not fix a whole office," they work with the belief that understanding individual differences is important.

"Diversity management teaches team building, valuing diversity, and it creates harmony," Pascal notes. "My staff does a wonderful job. They continuously rethink, redirect, customize, understand, and share."

—by Laura Bradbard



# Soaring raptors arrive at CC's back door

It all started two months back when I glanced up to see a rather large bird making off with what appeared to be a fluffy, gray squirrel. In the time it took me to blink, both disappeared over the roof on the south side of the Clinical Center. Vowing to make an appointment with the eye doctor, I thought no more of it.

But reports of headless pigeons and missing squirrels began to reach our office. It was time to smooth the ruffled feathers of dismayed CCers who wanted to protect the local wildlife from two murderous predators often seen lurking behind the Clinical Center near the sun deck. NIH photographer Ernie Branson nabbed a photo.

"Your bird is an immature, red-tailed hawk," says Linda Moore, a museum specialist in charge of raptor programs at the National Zoo, after viewing our photo. "It was hatched last spring and is capable of breeding this year, though they usually wait until they are in adult plumage." While the sexes look alike, females are often larger than males.

Like eagles, vultures, falcons, and owls, the hawks are raptors. "All raptors are distinguished by a carnivorous diet including insects, a hooked beak, and, except for the vultures, sharp talons on their powerful feet, which enable them to kill and grip their prey."

Raptors have incredible binocular vision and can spot prey from over a quarter of a mile away. They go into a fast dive, tucking their wings and feet until the last minute when they throw out their talons, hit the prey, and scoop it up. Hawks vary their hunting styles. Some are direct; some are sneaky, flying low along the ground and coming up from behind.

Red-tailed hawks are common to this area. As the rural communities give way to suburbs, hawks are finding a ready source of food in the form of urban squirrels, pigeons, and songbirds. All the more reason to educate people about the



A pair of red-tailed hawks have claimed the Clinical Center as habitat. The male has proved a capable hunter. (Photo by Ernie Branson)

predator/prey relationship, noted Moore pointing out that cats kill significantly more songbirds—up to 19 million a year in Wisconsin alone, according to one study.

"Hawks are successful at the hunt only 25 percent of the time," she estimates. Besides, young hawks have it tough. "It's difficult to hunt food. The prey can be too large and get away or even hurt the hawk. In fact, the mortality rate is as high as 80 percent during the first two years."

Even as adults, hawks face adversity. "There's habitat loss, power lines, and pesticides," lists Bryon Shipley, another zookeeper who formerly worked at the bird house and now takes care of large snakes and lizards at the National Zoo's reptile house.

Besides dangers from being shot at, other birds are often a threat. "Crows will form large gangs to mob and intimidate hawks. Crows and owls will often go after hawk eggs."

Shipley was impressed that our hawks have caught pigeons. "Pigeons

are wary, quick, and designed to release their feathers if grabbed by a predator."

Why would hawks choose NIH? "They love tall trees and open spaces for hunting, and woodsy areas for nesting," explains Moore. "And you must have a good prey base." That's just the environment offered on the CC's back lawn.

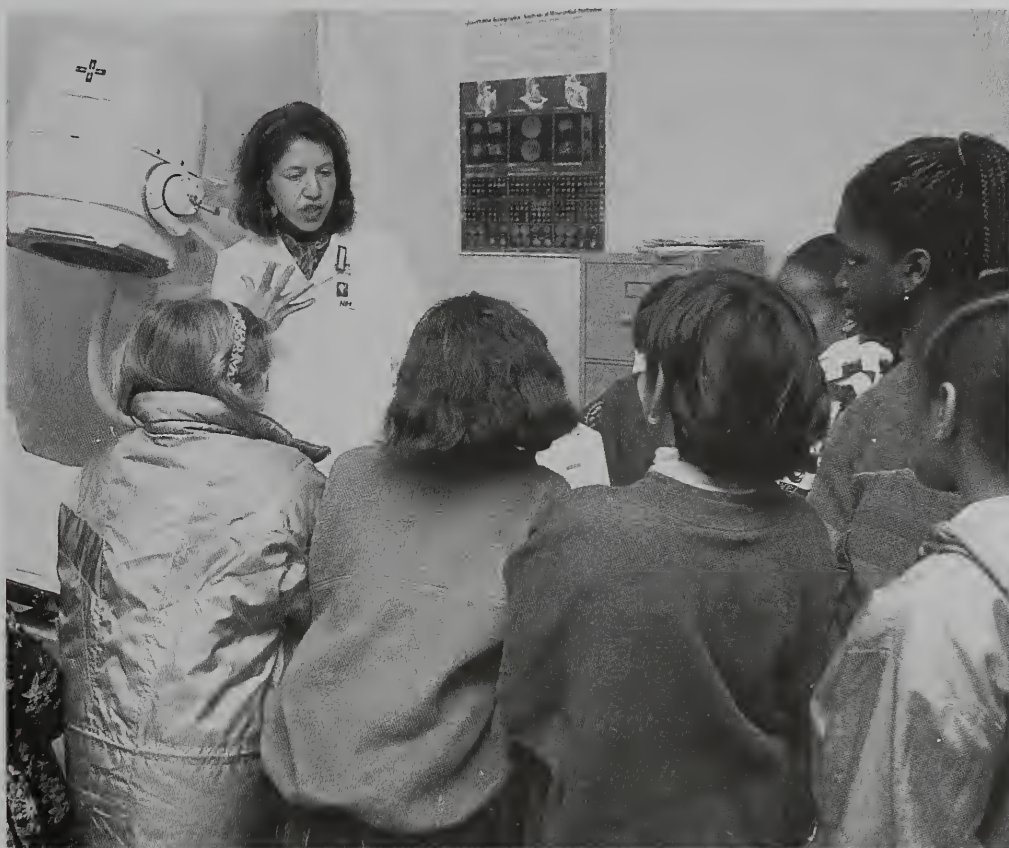
But don't worry about the squirrels and pigeons, assures Shipley. "Predators generally catch prey that are genetically deficient, weak, or sick. It's actually a way to strengthen the prey population because there's more food for the survivors. After an initial decline, the population surges back."

There's also a warning from the U.S. Fish and Wildlife Service.

Raptors are protected under the Migratory Bird Treaty Act. "This means you can't capture, harass, or harm raptors," warns special agent John Brooks, Division of Law Enforcement at the service. "The act

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## Questioning

"Are there any new diseases?" "How big is a brain?" "What did you study in school?" Those were typical questions Dr. Mary Andrich, Nuclear Medicine, fielded from visiting students from Rock Creek Forest Elementary School. The group's tour of the Nuclear Medicine Department with Dr. Andrich was part of a program sponsored by the Montgomery County school system designed to expose young women to careers in math and science.

# Administrative officer program restructured

The Clinical Center's hospital administrative officer program has been restructured and staff are now assigned directly to CC departments and offices.

The program was established in 1981 to provide administrative support to the patient care units. "Staff members have done a superb job providing a variety of services

and expertise during major and minor renovations, medical equipment and supplies purchasing, and in property management," noted Walter L. Jones, CC deputy director for management and operations. "Our goal in restructuring the program is to continue to offer the administrative officers' services and expertise in a more efficient framework."

Medical equipment, supply, and property management support provided by the administrative officers will be incorporated into the Materials Management Department. Edward Davis and Roger Mack have been assigned to that department.

Renovation project administration and facility support will be incorporated into Building Services. Crystal Pruitt and Stephanie Harrison have moved to that office.

Joan Mallin has been assigned to the CC's normal volunteer program, and Pamela Brooks has moved to the office of the director.

Jones asks that CC staffers with suggestions for further program enhancements contact him.

## ... law protects hawks, other birds

Continued from page six

protects all parts, including feathers, and products [such as] nests and eggs of the birds." It is illegal to possess even a feather. Brooks notes that the offense could mean a fine or jail time.

Brooks explains they have to be strict because it's difficult to know how people come to possess bird parts or products. "We want to discourage killing these birds for their plumage and we can't determine if you've just found a feather on the ground or have actually harmed a bird to get it."

The act, which protects most wild birds except for pigeons, starlings, house sparrows, and resident game birds, does allow exceptions to the rule. With a permit, feathers and products may be collected for scientific research, religious, or

educational purposes. If predators are out of control in an area, state and federal wildlife officials may authorize relocation efforts or special hunting rights.

Finally, what can we expect from our NIH hawks?

"There is no way to tell how long your hawks will stay," says Moore. "Raptors do migrate, but we see hawks here during winter. It's hard to know if birds from this area go south and birds farther north winter here." Hawks often return to good hunting and nesting places.

In the meantime, Moore suggests we enjoy the addition to our local ecosystem. It's easy to spot the hawks. Just look for a brownish color, a rounded tail, and lots of soaring as they hunt.

—by Jan Lipkin



# ... defining obstacles will be team's first priority

Continued from page one

and administrators along with support staff familiar with our mission."

Defining obstacles to carrying out work at the Clinical Center will be among the first priorities. "The reinventing government initiative offers us an opportunity to make improvements here that previously have not been possible. We will find a balance between high-quality research, top-notch patient care, and cost effectiveness," adds Dr. Gallin.

Among the issues team members will examine in-depth over the next few months are:

- Current Clinical Center mission. What is the CC's mission and what's the best way to measure success in meeting that mission?

- Vision for the future. How will the Clinical Center function a decade from now?

- Governance. How well does the CC's current governing structure serve its customers' interests, function effectively, and respond to change and hard choices?

- Information and reporting. What kind of information, training, and administrative systems are necessary for efficient, cost-effective performance?

- Budgeting. What's the best way to measure CC management performance and fiscal control?

- Benchmarking. What can we learn from other institutions?

- Options as a federal entity. How do federal laws governing such areas as personnel, procurement, and contracting limit operational flexibility?

- Reinvention laboratories. Can the CC become a testing ground for "reinventing government" programs?

Committee members will meet twice a month. Their final report will go to Dr. Philip R. Lee, assistant secretary for health, next January.

## may

**10** **Grand Rounds**  
**noon-1 p.m.**  
**Lipsett Amphitheater**  
*Male Sexual Differentiation*, Patricia K. Donahoe, M.D., Massachusetts General Hospital

**Wednesday Afternoon**  
**Lecture**  
**3 p.m.**  
**Masur Auditorium**  
*The History of the Development of Bone Marrow Transplantation and Its Applications to the Clinic*, E. Donnall Thomas, M.D., University of Washington School of Medicine. Hosted by the Clinical Research Interest Group

**17** **Grand Rounds**  
**noon-1 p.m.**  
**Lipsett Amphitheater**  
*Genetics of Hyperparathyroidism*, Stephen J. Marx, M.D., NIDDK; *Pertussis Immunization—Analogies with Diphtheria*, John B. Robbins, M.D., NICHD

**Wednesday Afternoon**  
**Lecture**  
**3 p.m.**  
**Masur Auditorium**  
*Brain Waves and Brain Wiring*, Carla J. Shatz, Ph.D., University of California, Berkeley. The NIH Director's Lecture

**24** **Grand Rounds**  
**noon-1 p.m.**  
**Lipsett Amphitheater**  
*Anti-Oxidant Effects of Estrogen in Post-Menopausal Women*, Richard O. Cannon III, M.D., NHLBI; *Treatment of Gaucher's Disease with Enzyme Replacement*, Norman W. Barton, M.D., Ph.D., NINDS

**Wednesday Afternoon**  
**Lecture**  
**3 p.m.**  
**Masur Auditorium**  
*Altering Telomerase RNA: Enzymatic and Cellular Consequences*, Elizabeth H. Blackburn, Ph.D., University of California, San Francisco

**25** **Scientific Symposium**  
**9 a.m.- noon**  
**Masur Auditorium**  
*Kinetics of HIV and CD4 Lymphocyte Turnover*, David Ho, M.D., Aaron Diamon AIDS Research Center; *Human Gene Therapy: Perspectives and Problems*, Inder Verma, Ph.D., Salk Institute; *Affirmative Action: Benefit or Liability for Asian/Pacific Islander Americans?* Bob Seuzuki, Ph.D., California State Polytechnic University. Sponsored by the Asian/Pacific Islander American Advisory Committee, NIH OEO

**31** **Grand Rounds**  
**noon-1 p.m.**  
**Lipsett Amphitheater**  
*Cardiac Sympathetic Nerve Function in Congestive Heart Failure*, Graeme Eisenhofer, Ph.D., NINDS; *You're Driving Me Crazy: New Data on the Neurobiology of Psychosis*, Adam Breier, M.D., NIMH

**Wednesday Afternoon**  
**Lecture**  
**3 p.m.**  
**Masur Auditorium**  
*Sorting Single Molecules in Evolutionary Research*, Professor Manfred Eigen, Ph.D., Max Planck Institute for Biophysical Chemistry. The Third Annual Fogarty International Lecture